

The events of 22 July this year were very special.

Their consequences, however – for example for the healthcare system – are more general.

## Reflections

«Does anybody need help?» The video of a man shouting out these words as he is running down the street Grubbegata holding a camera in front of him only minutes after the bomb exploded outside the government buildings on 22 July has become almost iconic. This short video sequence illustrates the situation on that day: chaos, extreme destruction, an almost eerie silence – and immediate and unselfish efforts by professionals and ordinary members of the public alike.

In this issue of the Journal we present some descriptions of the events of 22 July and reflections on them (1–8). This is far from a complete description or a final analysis but rather key observations and viewpoints from a number of those who experienced the events at close hand.

Stephen J.M. Sollid is a Chief Consultant at the Air-Ambulance Department of Oslo University Hospital. He describes how the pre-hospital emergency response services were in full swing near the government buildings when the reports of shooting at Utøya island came in, and how everybody quickly relocated to assume responsibility for the first assessments and treatment of injured people from the Labour Party summer youth camp (3). General practitioner and Municipal Health Officer in Hole Municipality, Bernt Ivar Gaarder, suddenly found himself in the role of operative medical leader of a large group of people who were willing and able to provide essential health care to the many who were affected (1). Chief Municipal Health Officer in Tønsberg Municipality, Frank Thrana, who is the medical leader of the municipality's recently established crisis response team, decided to summon the team on the morning of Saturday 23 July, when it became clear that a number of young people from the local community and their families would need assistance (2).

It was not only doctors and other health professionals who helped alleviate and treat injuries. At the Government buildings and on Utøya island, the victims themselves, as well as others who happened to be in the vicinity, made an invaluable effort. As did the numerous voluntary organisations that quickly came to the scene. Acting General Secretary of Norwegian People's Aid, Orrvar Dalby, is a guest contributor to this issue with an article that describes the relationship between voluntary helpers and the health services (8). In addition to its contribution to the rescue effort, Norwegian People's Aid was responsible for first-aid services at AUF's summer camp. One of their volunteers was killed on Utøya island.

The chain of emergency medical services was put to the test on 22 July – and passed! Most people think so, including the President of the Norwegian Medical Association, Hege Gjessing, and the Minister of Health, Anne-Grete Strøm-Erichsen (9, 10). Guttorm Brattebø is Head of Section at the Emergency Medical Treatment Section at Haukeland University Hospital, and possesses wide experience in the practice and organisation of pre-hospital emergency medicine. In his comment, he takes a closer look at the events and their implications for future organisation of the services (6). He believes that it is a paradox that even though everybody appears to be satisfied with the fact that emergency preparedness and the necessary skills were available, it is precisely the exercises and competence-building required to prepare for such rare events that are dropped when budgets are tight.

The terrorist attacks on 22 July caused massive material damage and extreme injuries to people. The attacks evoked strong emotions among those who were directly affected – relatives, friends, colleagues, rescue workers – as well as among us all. Chief Consultant at the Department of Acute Medicine, Oslo University Hospital, Øivind Ekeberg, reflects on the kind of psycho-social interventions that ought to be made in such situations (4). Grete Dyb, Medical Head of Section at the Norwegian Centre for Violence and Traumatic Stress Studies, describes the reactions and long-term effects that the patients must be prepared for (5). In his comment, the head of Doctors in Socio-Medical Work (LSA), Ernst Horgen, reminds us that it is difficult to predict how dramatic events will impact individuals, and that reactions will vary (7): «Some of those who experienced concentration camp and war were left with serious injuries and life-long disability. Others became leading politicians, scientists and industrialists.»

The 22 July will be remembered as a very special day in our history, and as a date we will never forget. Terror came to Norway with a force and on a scale that we had been unable to imagine. However, even though the events were unprecedented and gruesome, the consequences in the present and in the longer term are of a general nature. Every day, people are traumatised and need immediate as well as long-term follow-up by the health services (2, 4). Brattebø also reminds us of «the many people who at great danger to their own lives provide emergency medical services of high quality under extreme conditions in those parts of the world where such events occur on a daily basis.» In the same vein, Dalby asks us to consider the relationship between the dramatic events on the domestic scene and the huge, ongoing disasters occurring around the world.

As for myself, after 22 July I have been watching the news with different eyes. Young demonstrators who are shot in Syria, famine in Somalia, brutal violence, war and terrorism in numerous places – it has all suddenly come closer. Bleeding and starving people being carried away, despairing mothers, anguished children – they could have been our own loved ones. Witnessing brutal acts of violence, losing those near and dear and feeling terrified and unsafe is equally distressing, no matter who you are or where you live. After 22 July we know a lot more about how this is felt. This has given us the opportunity to show more compassion and understanding when we encounter people who have undergone traumatic experiences.

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Editor

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